LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2237-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION.
TYPE OF PERMIT

FEBRUARY 9, 1986
THIS PERMIT EXPIRES

RAYMOND DELKA
ISSUED TO

5700 SALTILLO RD.
ADDRESS

LINCOLN, NE 68506

T9N; R7E; Sec 32; Lot 47 I.T.; 54th & Saltillo Rd.
LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE NEW CONSTRUCTION

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
CB	8/20/85	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

REC'D AUG 16 1985

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2237-C

DATE: 8-6-85

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9N ; Range 7E ; Section 32 ;
   Block _____ : Lot 39 ~~A.T.L.~~ Addition _____
   Street Address 54th & Saltillo Rd

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: 3 miles ft.

Raymond Okka
Signature of Applicant (Owner or Lessee)

54th & Saltillo Rd
Address
Lincoln Ne

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/8/85. Date Frwd. 8/9/85. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8-9-85. Date Frwd. 8-15-85. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bourne

3. City or County Engineer: Date Rec'd. 8/9/85. Date Frwd. " . ACTION: Approved ☒ Disapproved ☐ Signature: Don R. Thomas

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-4-85 by: _____
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-4-85 By: Ron Mayrant

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
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B

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PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section 32SE¼
Property Dimensions: 350 ft. x 620 ft. Area: 4.98 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☒ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 8/6 to 8/7 . Weather: Precip. _____ Temp. 80's .

OWNER: Raymond Delka

Address: _____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36	8/6	5PM	8/7	4PM	8/7	7:30	19 5/8	8:00	20 1/8	30	1/2	60
2	36	8/6	"	8/7	"	"	7:32	25 1/4	7:02	26 1/2	30	1 1/4	
3	36	8/6	"	8/7	"	"	7:35	24 1/4	8:05	25	30	3/4	
4	36	8/6	"	8/7	"	"	7:36	23	8:06	23 7/8	30	7/8	
5	36	8/6	"	8/7	"	"	7:38	19 3/4	8:08	20 3/8	30	5/8	
6	36	8/6	"	8/7	"	"	7:40	23 1/2	8:10	24 3/4	30	1 1/4	

Raymond L Delka
Signature of Person Conducting Test

Address 54th & Saltillo Rd Phone 423-4720

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Pawnee Clay Loam but described as an inclusion
Date: AUGUST 8, 1985

Approved Percolation Rate (a)
A. 34 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

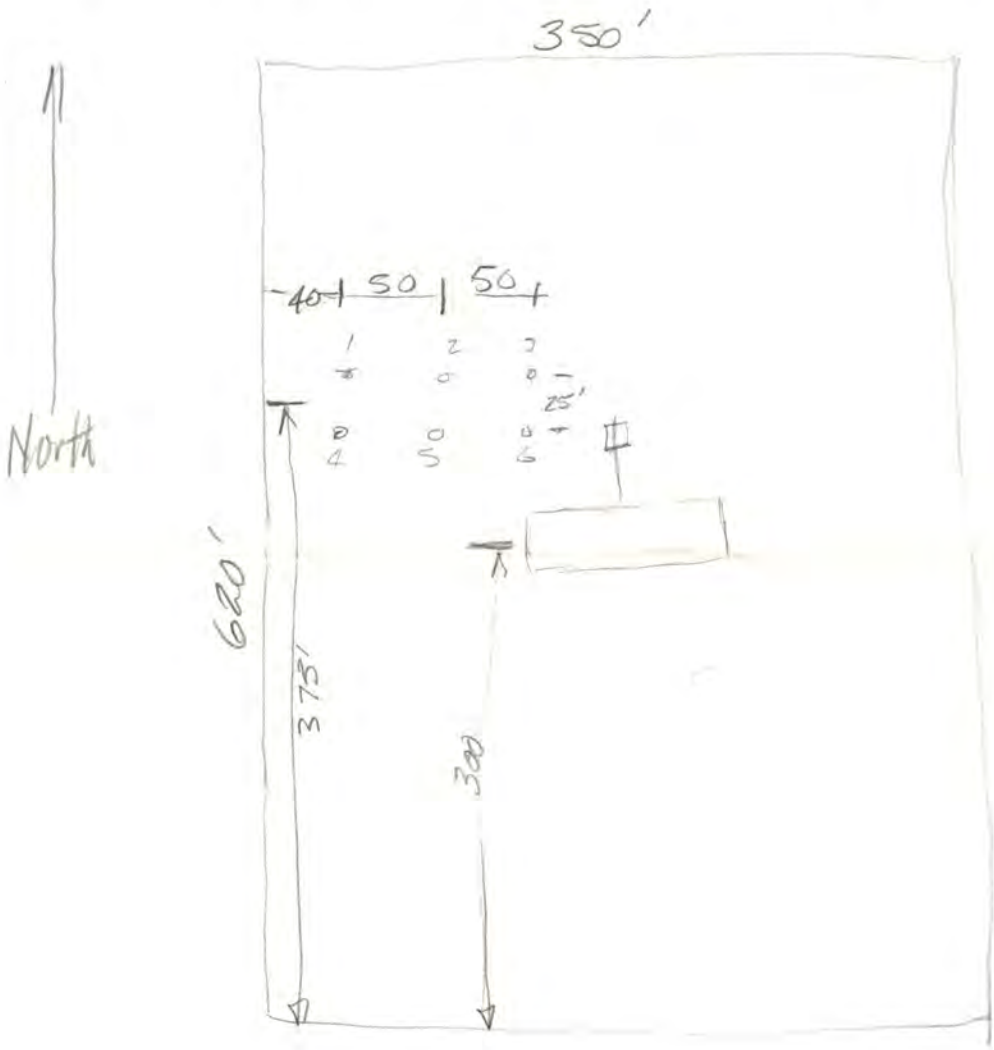
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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2200 St. Marys Avenue
Lincoln, Nebraska 68502
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C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

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Indicate on sketch if residence and well are exisiting or proposed.



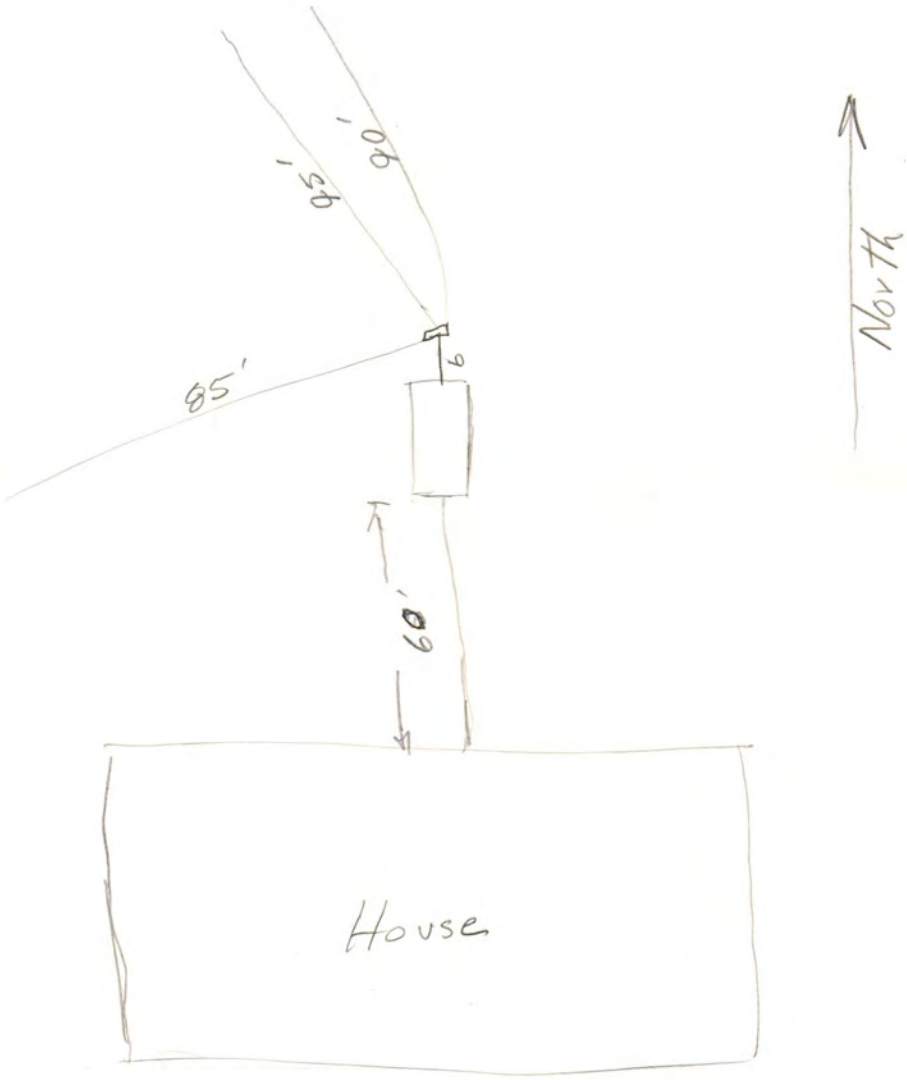
REVIEWING ACTION

Remarks: _____

Date: August 8, 1985

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed ~~798~~ sq.ft.

Jerrold C. Hood
Signature of Reviewing Official



By Owner
Raymond Deha